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EXPRESS MAIL CERTIFICATE

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I hereby certify that, on the date indicated above I deposited this paper or fee and every paper referred to therein with the U.S. Postal Service and that it was addressed for delivery to the Commissioner for Patents, Mail Stop Patent Application, Box P.O. Box 1450, Alexandria, VA 22313-1450 by "Express Mail Post Office to Addressee" service.

Richard T. Lyon

Name (Print)

[Signature]  
Signature

PATENT

Microsoft Docket No. 307143.01

L&H No. MCS-074-03

Hon. Commissioner for Patents  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

SIR:

Enclosed please find an application for United States patent as identified below:

Inventor/s: Agrawala et al.

Title: **A SYSTEM AND PROCESS FOR CONTROLLING A SHARED DISPLAY  
GIVEN INPUTS FROM MULTIPLE USERS USING MULTIPLE INPUT  
MODALITIES**

including the items indicated:

1. Specification and 38 claims: 4 indep.; 34 dep.; 0 multiple dep.  
(35 pages)
2. Drawings: 3 sheets.
3. Patent Fee Computation Sheet (1 page) and Credit Card Payment Form (1 page)
4. Executed Declaration and Power of Attorney (3 pages)
5. Assignment Coversheet (1 page) and Assignment Document (3 pages) and Credit Card Payment Form (1 page)
6. Return receipt postcard

Correspondence Address: - **Customer No: 27662**

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Respectfully submitted

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Richard T. Lyon  
Reg. No. 37,385  
Attorney for Applicant(s)

16179 U.S. PTO  
011504

PATENT  
Microsoft Docket No. 307143.01  
L&H No. MCS-074-03

PATENT FEE COMPUTATION SHEET

	Claims	Number Extra	Fee
Basic Fee.....			\$ 770.00
Total Claims.....	38 - 20 =	18 x \$18	\$ 324.00
Independent Claims.....	4 - 3 =	1 x \$86	\$ 86.00
If Multiple Dependent Claims Are Present, Add 280.00 EA.....			\$ 0.00
<b>TOTAL AMOUNT DUE.....</b>			<b>\$ 1,180.00</b>

☐ A check in the amount of \$ \_\_\_\_\_ is attached.

☒ A Credit Card Payment Form (PTO-2038) for payment in the amount of \$ 1,180.00 is attached.

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☐ Charge any additional filing fees required under 37 CFR 1.16 and 1.17.

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